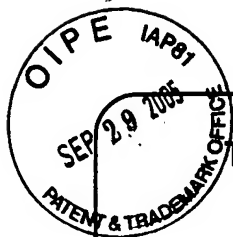


10-03-05

IFW



PTO/SB/21 (09-04)

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

26

Application Number

10/672,396

Filing Date

September 26, 2003

First Named Inventor

Santi, Daniel V.

Art Unit

1646

Examiner Name

Unassigned

Attorney Docket Number

020547-003610US

## ENCLOSURES (Check all that apply)

- |   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form - 1 pg in duplicate (2 pgs total)<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply (19 pgs)<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Supplemental ADS (4 pgs); and<br>Return Postcard |
|---|--|---|

Remarks

The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

Townsend and Townsend and Crew LLP

Signature

Printed name

Randolph Ted Apple

Date

9/29/2005

Reg. No.

36,429

## CERTIFICATE OF TRANSMISSION/MAILING

Express Mail Label: EV 529 856 511 US

I hereby certify that this correspondence is being deposited with the United States Postal Service with "Express Mail Post Office to Address" service under 37 CFR 1.10 on September 29, 2005 and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature

Typed or printed name

Susan Jensen

Date

09/29/2005